



**Brock**  
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**FACULTY OF GRADUATE STUDIES**  
**SUPERVISORY COMMITTEE APPROVAL OF THESIS FOR ORAL DEFENCE**

*(Signature of all Supervisory Committee Members required)*

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Date Submitted: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Graduate Program: \_\_\_\_\_

Graduate Program Director: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Thesis Title: \_\_\_\_\_

**We the Supervisory Committee approve the PhD thesis for oral defence.**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date of Defence: \_\_\_\_\_

List of Examination Committee Membership: *including at minimum, the Supervisory Committee, the Internal External Examiner (Brock faculty member from outside the graduate program) and the External Examiner*

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Chair of Defence: \_\_\_\_\_

Signature of Dean of Graduate Studies: \_\_\_\_\_ Date: \_\_\_\_\_